

**APPLICATION DATA SHEET****Application Information**

Application number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:

Computer Readable Form (CRF)?:: No

Number of copies of CRF::

Title :: FAULT MANAGEMENT METHOD FOR  
ELECTRONIC BALLAST

Attorney Docket Number:: 853063.499

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 5

Small Entity?: No

Petition included?: No

Petition Type::

Licensed U.S. Gov't Agency::

Contract or Grant No::

Secrecy Order in Parent Appl.?: No

**First Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Flavia  
Middle Name::  
Family Name:: Borella  
Name Suffix::  
City of Residence:: Santo Stefano Ticino (MI)  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Garibaldi, 14  
City of mailing address:: Santo Stefano Ticino (MI)  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-20010

**Second Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Ugo  
Middle Name::  
Family Name:: Moriconi  
Name Suffix::  
City of Residence:: Dalmine (BG)  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Trentino, 4

City of mailing address:: Dalmine (BG)  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-24044

### Third Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Albino  
Middle Name::  
Family Name:: Pidutti  
Name Suffix::  
City of Residence:: Udine  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Joppi, 42  
City of mailing address:: Udine  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-33100

### Fourth Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Roberto  
Middle Name::  
Family Name:: Quaglino

Name Suffix::  
City of Residence:: Biella  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via dei Passeri, 24  
City of mailing address:: Biella  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-13900

### **Fifth Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Italy  
Status:: Full Capacity  
Given Name:: Francesca  
Middle Name::  
Family Name:: Sandrini  
Name Suffix::  
City of Residence:: Milano  
State or Province of Residence::  
Country of Residence:: Italy  
Street of mailing address:: Via Carbonera, 4/B  
City of mailing address:: Milano  
State or Province of mailing address::  
Country of mailing address:: Italy  
Postal or Zip Code of mailing address:: I-20100

**Correspondence Information**Correspondence Customer Number :: **00500****Representative Information**

|                                  |  |              |
|----------------------------------|--|--------------|
| Representative Customer Number:: |  | <b>00500</b> |
|----------------------------------|--|--------------|

**Domestic Priority Information**

| Application :: | Continuity Type:: | Parent Application:: | Parent Filing Date:: |
|----------------|-------------------|----------------------|----------------------|
|                |                   |                      |                      |
|                |                   |                      |                      |
|                |                   |                      |                      |

**Foreign Priority Information**

| Country::     | Application number:: | Filing Date:: | Priority Claimed:: |
|---------------|----------------------|---------------|--------------------|
| International | PCT/IT01/00031       | 01/24/01      | Yes                |
|               |                      |               |                    |
|               |                      |               |                    |

**Assignee Information**

|   |                           |
|---|---------------------------|
| Assignee name::                         | STMicroelectronics S.r.l. |
| Street of mailing address::             | Via C. Olivetti, 2        |
| City of mailing address::               | Agrate Brianza (MI)       |
| State or Province of mailing address::  |                           |
| Country of mailing address::            | Italy                     |
| Postal or Zip Code of mailing address:: | I-20041                   |

D:\NrPortbl\Manage\KRISTINEH\251894\_1 DOC [9/19/01]